

2568

PLACE OF BIRTH

1. County of DeLa

District of Miami

Town of Miami

or

City of Lin Oak St. No. 167 St. 506 Ward) (If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Frank Murphy (If child is not yet named, make supplemental report, as directed)

3. Sex of child M To be answered ONLY in event of plural births. 4. Twin, triplet or other. 5. No., in order of birth. 6. Legitimate? F 7. Date of birth 10/28/22 (Month, day, year)

8. FATHER Full name Mike D. Murphy 9. Residence (Usual place of abode) If nonresident, give place and State Miami 10. Color or race White 11. Age at last birthday 38 (Years) 12. Birthplace (city or place) (State or country) Montana 13. Occupation Mines Nature of Industry

14. MOTHER Full maiden name Mary Murphy 15. Residence (Usual place of abode) If nonresident, give place and State Miami 16. Color or race Wh 17. Age at last birthday 31 (Years) 18. Birthplace (city or place) (State or country) Montana 19. Occupation Housewife Nature of Industry

20. Number of children of this mother (Taken as of time of birth of child here-in certified and including this child.) (a) Born alive and now living 7 (b) Born alive but now dead (c) Stillborn

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 7 A.M. on the date above stated. (Born alive or stillborn)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature Charles E. Dwin M.D. (Physician or midwife) Address Miami Given name added from a supplemental report 648-1028-448 (Month, day, year) Registrar.

Filed 10/31/22, 1922 B. W. Hard by P. E. Dwin Local Registrar. Filed 11/6, 1922 B. E. J. O. County Registrar.

the number of each, in order of birth, stated.